

Humana Medicare Advantage

Important Information
about your PPO Plan



Welcome to Humana and the Group Medicare Employer PPO

Humana – a Fortune 100 company – has been in the healthcare business for 49 years. Our broad spectrum of health plans covers 10.4 million people in the United States and Puerto Rico. Among our specialties is creating plans for people who are also covered by Medicare – over 3.6 million people enjoy the protection of our Medicare Programs.

The sponsor of your retiree benefits program trusts Humana to serve you. This newsletter describes the features and benefits of your new plan – the unique Group Medicare Employer Preferred Provider Organization (PPO) Plan.

In-Network or Out-of-Network, Same Great Services

Your retiree medical coverage will be under a new type of plan: a **Group Medicare Employer Preferred Provider Organization (PPO) Plan**. It combines maximum flexibility in choosing your healthcare providers with valuable benefits.

Each time you need healthcare, you can choose to receive care from a Humana Medicare PPO network provider, or you may choose an out-of-network provider who agrees to accept Medicare.

HUMANA
Guidance when you need it most



When you receive your directory of Humana Group Medicare Employer PPO network providers in your area, look inside. You may be pleasantly surprised to find some of the doctors and hospitals you use today are already part of Humana's preferred provider network.

How You'll Use Your Benefits

- Remain entitled to Medicare Part A and enrolled in Medicare Part B. If you're new to Medicare, contact your local Social Security Administration office 90 days before you become eligible (usually at age 65), and arrange to pay your required monthly premium.
- Use your Humana Group Medicare Employer PPO Plan ID card each time you need care. Put your Medicare ID card in a safe place – and **do not** present it to your provider.
- When you receive care, pay your share of the cost directly to the provider. Your provider will use the information on your Humana Group Medicare Employer PPO ID card to file claims and receive payment from Humana. As long as the provider accepts Medicare, they should not "balance bill" you for additional charges.

Other Features of Your Humana Group Medicare Employer PPO Coverage

Your Humana Medicare Employer PPO coverage includes valuable health, wellness, and informational features, all designed especially for Medicare-eligibles:

- **Online tools** – these easy-to-use resources have the information you need to learn about network providers in your area, so you can choose the ones who best meet your specific needs
- **MyHumana** – your personalized, online information resource to help you track and manage all the care you receive
- **HumanaFirst® Nurse Advice Line** – 24 hours a day, seven days a week, telephone access to registered nurses
- **Humana Active Outlook™** – a wide variety of health and wellness programs, including publications, seminars, tobacco cessation programs and assistance with chronic health conditions
- **SilverSneakers® or Silver&Fit®** – fitness courses and training opportunities in your community

Who Are Humana Network Providers?

Humana seeks out hospitals, physicians, clinics, labs, and therapists who believe in offering efficient, cost-effective, **coordinated care**. When network providers share information through Humana's administrative systems, patients often enjoy a more successful outcome.

Providers who apply for our network go through a credentialing process, where Humana confirms their academic backgrounds and licensing status. Once approved, our network team offers education and training to both providers and their administrative staff. Because the practice of medicine is so personal, we also help them get to know other network providers in their community so they will feel comfortable working with each other.

Why Do Providers Join Our Network?

Provider reimbursements under Medicare are comparable, regardless of network affiliation. Providers want to be part of the Humana Medicare Employer PPO network for other important reasons:

- Humana network providers recommend each other to patients, in part because they know they share the same philosophy of providing efficient, cost-effective, coordinated care.
- They see the value in Humana's administrative and provider systems, which are designed to make it easier for them to file claims and receive payments.
- They appreciate the educational and training opportunities we offer providers and their staff.

If you haven't yet taken advantage of these programs, ask your plan sponsor for information or call Humana Group Medicare Customer Care at **1-866-396-8810**. If you have a speech or hearing impairment and use a TTY, call **711**. We're available Monday through Friday from 8 a.m. to 8 p.m.

A Health plan with a Medicare contract, available to anyone entitled to Part A and enrolled in Part B of Medicare. The benefit information provided herein is a brief summary, not a comprehensive description of benefits. For more information contact the plan. You must continue to pay your Medicare Part B premium.

This document is available in alternative formats or languages. Please call customer care at 1-866-396-8810 (TTY: 711), seven days a week from 8 a.m. to 8 p.m. If you're asked to leave a message, we'll call you back by the end of the next business day.

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